WELCOME, THIS WEB CONFERENCE WILL BEGIN SOON

USING DATA TO GROW PREVENTION PROGRAMS

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CALIFORNIA COALITION AGAINST SEXUAL ASSAULT

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How to use this technology

- Raise hand
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This training is supported by the California Department of Public Health, Safe and Active Communities Branch, Rape Prevention and Education (RPE) Program, funded by the Centers for Disease Control and Prevention (CDC), National Center for Injury Prevention and Control.

By the end of our time together today, participants should be able to:

- Identify how data can strengthen program development activities.
- Describe types and sources of data that may inform program development.
- Identify readily available data including community assessment data, agency data, and community data.

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Web Conference Presenters

Abigail Sims, CALCASA

Mina White, CDPH

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Question

What is data?

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What is data?

Data is just information

Data about the issue

- Big picture
  - National and state
  - Prevalence
  - Effects
  - Risk and protective factors
  - Demographic information

- Nearly 1 in 5 women in the United States has been raped in her lifetime (18.3%)
- One percent, or approximately 1.3 million women, reported some type of rape victim-ization in the 12 months prior to taking the survey.
- Approximately 1 in 71 men in the United States (1.4%) reported having been raped in his lifetime. (Too few men reported rape in the 12 months prior to taking the survey to produce a reliable 12 month preva-lence estimate.)
- More than half (51.1%) of female victims of rape reported being raped by an intimate partner and 40.8% by an acquaintance; for male victims, more than half (52.4%) reported being raped by an acquaintance and 15.1% by a stranger.
- Approximately 1 in 8 female victims (12.5%) reported being raped by a family member, and 2.5% by a person in a position of authority. About 1 in 7 female victims (13.8%) reported being raped by a stranger.

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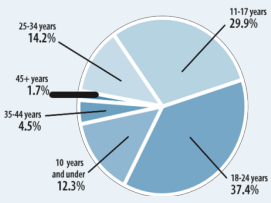
NISVS

Age at Time of First Completed Rape Victimization In Lifetime Among Female Victims — NISVS 2010[1,2]



[1]The reported age is the youngest age reported across all perpetrators.
[2]All percentages are weighted to U.S. population.

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NISVS

CA Statistics, California Women's Health Survey (CWHS), 2008-09

- 17% of women in California reported experiencing sexual violence during her lifetime
- 10% of women said the SV was first experienced over the age of 18; 12% said it was under the age of 18
- 0.3% of women in California (30,000 women) experienced SV during the last 12 months

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CA Statistics, CWHS, 2008-09

California Lifetime Sexual Violence Victimization by RaceEthnicity, CWHS 2008-09

	N	%
White Non Hispanic	1168197	20.96
Black Non Hispanic	149586	23.12
White Hispanic	295724	13.45
Black Hispanic	19732	24.21
Other Hispanic	18046	7.92
API	55796	4.61
American Indian	58223	43.78
Total	1765304	

Source: California Women's Health Survey, 2008-09

California Healthy Kids Survey online:

- chks.wested.org/reports/search
- Core module includes dating violence module
- Optional module on drugs/alcohol, safety, and violence includes "forced sex" question – but this module is hardly ever used
- Can also find data on demographics, school connectedness, alcohol/drug use, mental health, etc. for specific districts or schools (risk factors)
- If report is not available online, your school administrator may have their school-specific data – Ask!

Demographics

- Urban, rural
- Race/ethnicity
- Age
- LGTBQ
- Poverty level
- Education
- Language
- U.S. Census American Factfinder: http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml
- ASK CHIS (California Health Interview Survey) has data by county on sexual orientation: http://ask.chis.ucla.edu/main/default.asp

Where is the data?

Existing data:

- Institutions (Emergency Departments, crime stats, census, public records, school districts)
- Research
- Agency data

Question

What agency data do you have?

Where is the data?

Methods to generate/ compile new data:

- Surveys
- Interviews
- Focus groups
- Observation
- Community mapping
- Asset mapping

Question

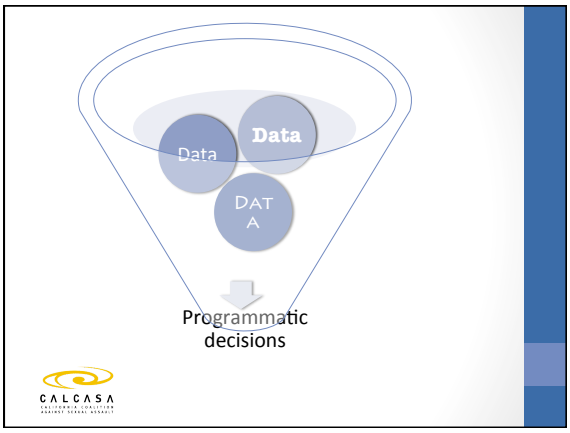
What information have you gathered from your community?

Benefits of data

- Determine decision criteria
- Identify priorities
- Locate needs and assets
- Unearth confounding factors
- Identify contextual considerations

Limitations of data

- Lost in the weeds
- Doesn't exist
- May not mean what you think it means
- May not be reliable or relevant
- Decision paralysis


Data
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Programmatic
decisions
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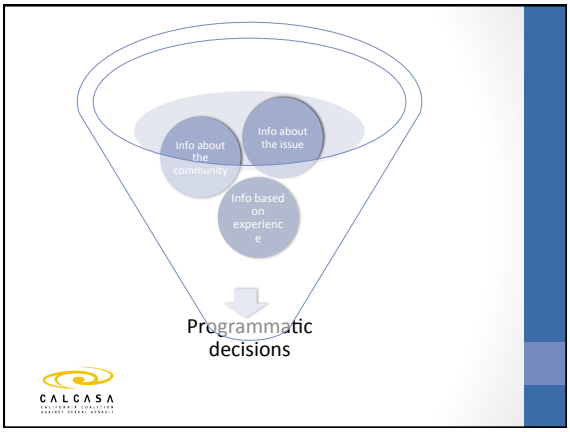
Info about
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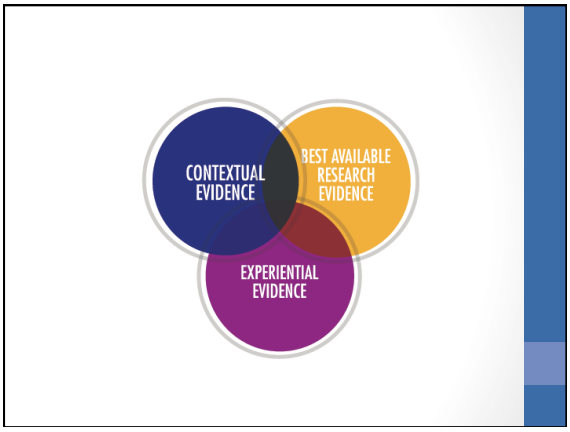
CONTEXTUAL
EVIDENCE
BEST AVAILABLE
RESEARCH
EVIDENCE
EXPERIENTIAL
EVIDENCE

Data about the issue (Best Available Research Evidence)

Can support

- Focusing resources to effect the most significant impact
- The connection between programmatic activities and needs and opportunities
- Selecting interventions

Limitations

- Limited information and evidence available
- The data that does exist may not translate to other communities

Community Responsiveness

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Information about your community (Contextual Evidence)

Can support

- Documentation
- New perspectives
- Credibility
- Community relationships/ access

Limitations

- Trust
- Misrepresentation
- May not be the whole story

Information about (Experiential Evidence)

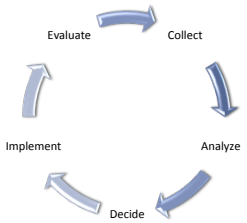
Can support

- Learning from history
- Assessing buy-in

Limitations

- Applicability
- Subjective
- May not be the whole story

Using data to build and monitor programs



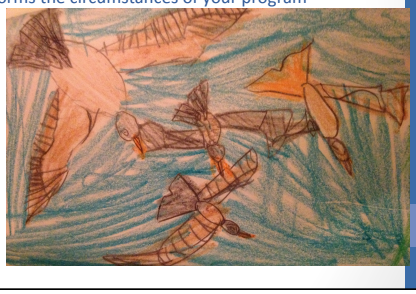
Your data landscape

Question

What are you most curious about that data may be able to illuminate?

Your data vision

- Paint a picture/tell a story
- Includes needs and assets
- Informs the circumstances of your program



Steps to using data

Gather data → Analyze data → Make decisions

Collect/Gather

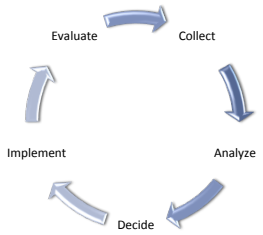
Step 1 Collect

Analyze

Analyze Step 2

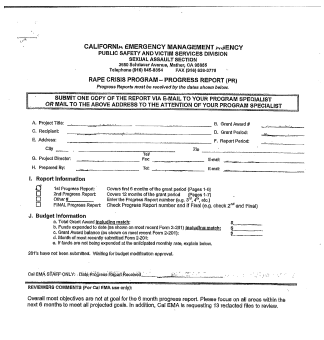
Proceed with confidence!

Continuing to use data



Data you have on hand

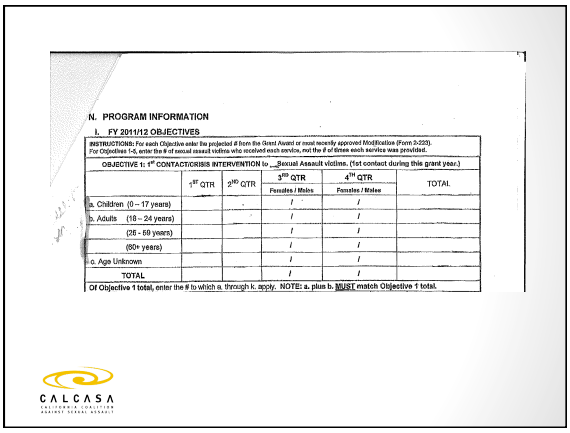
- OES report
- Program evaluation data
- Other applications and reports
- Annual report
- Media
- Donor materials



CALIFORNIA EMERGENCY MANAGEMENT AGENCY
PUBLIC SAFETY AND VICTIM SERVICES DIVISION
SEXUAL ASSAULT SECTION

RAPE CRISIS PROGRAM – PROGRESS REPORT (PR)

SUBMIT ONE COPY OF THE REPORT VIA E-MAIL TO YOUR PROGRAM SPECIALIST OR MAIL TO THE ABOVE ADDRESS TO THE ATTENTION OF YOUR PROGRAM SPECIALIST



N. PROGRAM INFORMATION

I. FY 2011/12 OBJECTIVES

INSTRUCTIONS: For each Objective enter the projected # from the Grant Award or most recently approved Modification (Form 3-233).
For Objectives 1-5, enter the # of sexual assault victims who received each service, not the # of times each service was provided.

OBJECTIVE 1: 1st CONTACT/CRISIS INTERVENTION for Sexual Assault victims. (1st contact during this grant year.)

	1ST QTR	2ND QTR	3RD QTR Females / Males	4TH QTR Females / Males	TOTAL
a. Children (0 – 17 years)			/	/	
b. Adults (18 – 24 years)			/	/	
(25 - 59 years)			/	/	
(60+ years)			/	/	
c. Age Unknown			/	/	
TOTAL			/	/	

Of Objective 1 total, enter the # to which a. through k. apply. NOTE: a. plus b. MUST match Objective 1 total.

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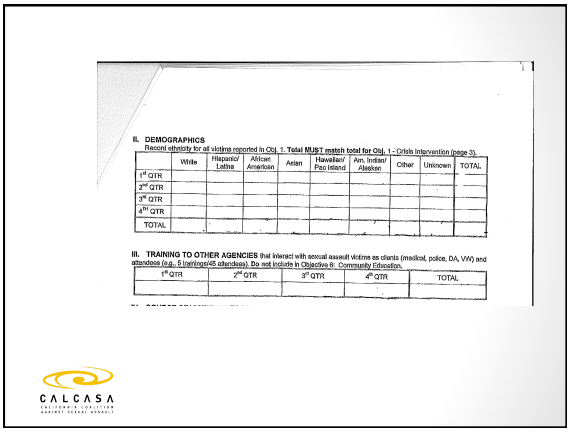

II. DEMOGRAPHICS
Record ethnicity for all victims reported in Obj. 1. Total MUST match total for Obj. 1 - Crisis Intervention (page 3).

	White	Hispanic/ Latina	African American	Asian	Hawaiian/ Pac Island	Am. Indian/ Alaskan	Other	Unknown	TOTAL
1ST QTR									
2ND QTR									
3RD QTR									
4TH QTR									
TOTAL									

III. TRAINING TO OTHER AGENCIES that interact with sexual assault victims as clients (medical, police, DA, VW) and attendees (e.g., 5 trainings/45 attendees). Do not include in Objective 6: Community Education.

1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL

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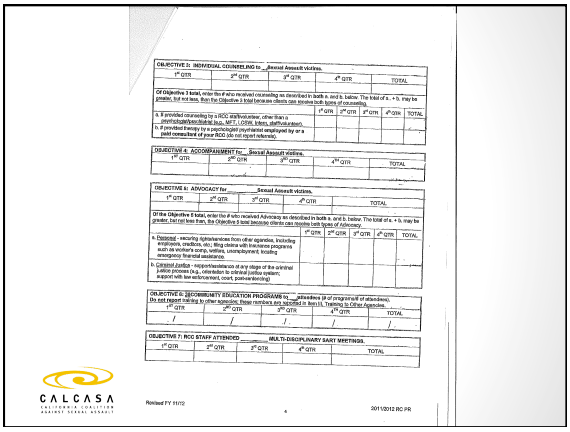

OBJECTIVE 2: INDIVIDUAL COUNSELING for Sexual Assault victims.

1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL

Of Objective 2 total, enter the # who received counseling as described in both a. and b. below. The total of a. + b. may be greater, but not less, than the Objective 2 total because clients can receive both types of counseling.

	1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL
a. If provided counseling by a RCC staff/volunteer, other than a psychologist/psychiatrist (e.g., MFT, LCSW, Intern, staff/volunteer).					
b. If provided counseling by a psychologist/ psychiatrist employed by or a paid consultant of your RCC (do not report referrals).					

OBJECTIVE 4: ACCOMPANIMENT for Sexual Assault victims.

1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL

OBJECTIVE 5: ADVOCACY for Sexual Assault victims.

1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL

Of the Objective 5 total, enter the # who received Advocacy as described in both a. and b. below. The total of a. + b. may be greater, but not less than, the Objective 5 total because clients can receive both types of Advocacy.

	1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL
a. Personal - securing rights/services from other agencies, including employers, creditors, etc.; filing claims with insurance programs such as victim's comp, victims, unemployment; issuing emergency financial assistance.					
b. Criminal Justice - support/assistance at any stage of the criminal justice process (e.g., orientation to criminal justice system; support with law enforcement, court, postverdict/sentencing).					

OBJECTIVE 6: COMMUNITY EDUCATION PROGRAMS for attendees (# of programs/# of attendees).
Do not report mailing to other agencies; those numbers are reported in Item III, Training to Other Agencies.

1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL
/	/	/	/	/

OBJECTIVE 7: RCC STAFF ATTENDED MULTI-DISCIPLINARY SART MEETINGS.

1ST QTR	2ND QTR	3RD QTR	4TH QTR	TOTAL

Revised FY 11/12 4 2011/2012 RC PR

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Community assessment "hacks"

- Call 5 people for key informant interviews
- Have a focus group at volunteer training/ staff meeting/ as part of program implementation/ professional training
- Talk to colleagues
- Observe

Question

What tips or ideas for low impact assessment activities sound promising or have worked for you?

Stat Packet 2014

- Prevalence
- Consequences
- Prevention
- Supportive interventions
- Systems response
- Campus
- Military
- SA in detention
- Intersection of SA and DV
- Population specific information

Next stops

- Regional Training Dates
  - March 7, 2014 10am-3pm Santa Cruz, CA
  - March 11, 2014 10am-3pm Visalia, CA
  - March 19, 2014 10am-3pm Lompoc, CA
  - March 21, 2014 10am-3pm Redding, CA
  - March 25, 2014 10am-3pm Burlingame, CA
  - March 28, 2014 10am-3pm Los Angeles, CA

For more information contact

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